

2012 NARA PARK BEACH MEMBERSHIP REGISTRATION

Online Registration Now Available: www.acton-ma.gov/register

Registration for beach membership may be completed online, in person at the Acton Town Hall, or by mail. Please complete your registration form—incomplete forms will not be processed. All forms must be signed and all birthdates must be noted. Mailed-in registrations must be postmarked by May 31, 2012 to receive early bird discount. Beach passes will be mailed out within seven business days of registration received. If you have paid for your season pass and have not received it and want to use the beach, verification can be made by the beach monitor by checking our current beach member roster. For same day online payment of membership, show beach monitor your online receipt. A complimentary limited guest pass is given to each seasonal membership purchased.

For further information contact the Recreation Department at (978) 929-6640 during business hours, 8 AM – 5 PM, Monday-Friday.

Mail registration form to: Acton Recreation Department, 472 Main Street, Acton, MA 01720.

Please make check payable to: "Town of Acton" (no out-of-state checks accepted)

Credit Card Transaction: Save money and register online! If paying for membership with MasterCard or VISA in-person, a \$3 credit card cost fee for each \$100 charged will be added.

All cash transactions must be completed in person at the Recreation Department located at the Acton Town Hall.

2012 SUMMER BEACH MEMBERSHIP

Saturday, May 26 – Friday, August 24

(Please Print)

Family (Household) Last Name _____

Residential Address _____ City _____ ST _____ Zip _____

Mailing Address (if different) _____ City _____ ST _____ Zip _____

Email Address _____

Telephone (Home) _____ Alt. # _____

The Recreation Department reserves the right to request/verify proof of residency. For family and couple memberships, list all immediate household family members and ages below.

Check Type of Membership:

ACTON RESIDENTS

Early Bird Rate:
If paid by Jan.-May 31, 2012

Regular Season Rate:
Rates as of June 1 - Aug. 26, 2012

<input type="checkbox"/> Family	\$135 ____	\$185 ____
<input type="checkbox"/> Individual	\$75 ____	\$105 ____
<input type="checkbox"/> Senior (65+)	\$25 ____	\$25 ____
<input type="checkbox"/> Couple (2 adults)	\$100 ____	\$135 ____

NON-ACTON RESIDENTS

Early Bird Rate:
If paid by Jan. - May 31, 2012

Regular Season Rate:
Rates as of June 1 - Aug. 26, 2012

<input type="checkbox"/> Family	\$185 ____	\$235 ____
<input type="checkbox"/> Individual	\$110 ____	\$135 ____
<input type="checkbox"/> Senior (65+)	\$40 ____	\$40 ____
<input type="checkbox"/> Couple (2 adults)	\$140 ____	\$175 ____

Daily Rates Available: Acton Residents: \$5 per person for ages 2 & up, with a cap of \$20 per household family.

Non-Acton Residents: \$7 per person for ages 2 & up, with a cap of \$25 per household family.

List *Household Members, Date of Birth, Male/Female:

Name: _____ Birthdate ____/____/____ M / F Name: _____ Birthdate ____/____/____ M / F

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Name: _____ Birthdate ____/____/____ M / F Name: _____ Birthdate ____/____/____ M / F

**Household members are those who reside in your home year-round and can be verified by the Town Clerk.*

WAIVER: Refunds are not given for beach memberships. Refunds are also not given for weather related closures, Board of Health water standards, or lifeguard safety ratios. The Town of Acton has the right to revoke a beach membership for non compliance to beach rules and regulations.

Applicant and family members agree to hold harmless the Town of Acton and/or its employees from claims or liability related to any accident that may occur. Applicant and family members give permission for medical treatment to be given if the need arises. I attest that the household members listed reside year-round at my residence listed above.

_____/_____/2012
Applicant's Signature (Parent/Guardian if under 18) **Date**

Office Use Only:

Paid by: CK ____ MC ____ VISA ____ CASH ____ Other ____ **Amount Paid:** _____ **Date Received:** ____/____/2012

Staff: cg ____ ms ____ cf ____ mh ____ **Special Note:** _____